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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/674,717	<b>FILING DATE</b> 11/06/2000 <b>RULE</b> -	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2664	<b>ATTORNEY DOCKET NO.</b> 36-1382
<b>APPLICANTS</b> Robert J Briscoe, Suffolk, GBN ; Michael Rizzo, Suffolk, GBN ; <i>yes, pg</i>				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/GB99/01765 06/04/1999				
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 9812161.9 06/05/1998 EUROPEAN PATENT OFFICE (EPO) 98309609.0 11/24/1998 UNITED KINGDOM 9825723.1 11/24/1998 UNITED KINGDOM 9902052.1 01/29/1999 UNITED KINGDOM 9902648.6 02/05/1999 <i>yes, pg</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/19/2001</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials		<b>STATE OR COUNTRY</b> GBN	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 33
		<b>INDEPENDENT CLAIMS</b> 11		
<b>ADDRESS</b> Nixon & Vanderhye 1100 North Glebe Road 8th Floor Arlington, VA 22201				
<b>TITLE</b> Communications network				
<b>FILING FEE RECEIVED</b> 1734	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 674717 ✓	RECEIPT DATE:	11 / 06 / 00 ✓
IA NUMBER:	PCT/ GB99 / 01765 ✓	IA FILING DATE:	06 / 04 / 99 ✓
FAMILY NAME:	BRISCOE ✓	DELAY WAIVED (Y/N):	Y ✓
GIVEN NAME:	ROBERT J ✓	DEMAND RECEIVED (Y/N):	Y ✓
PRIORITY CLAIMED (Y/N):	Y ✓	PRIORITY DATE:	06 / 05 / 99 ✓
NO BASIC FEE (Y/N):	N ✓	US DESIGNATED ONLY (Y/N):	N ✓
ATTORNEY DOCKET NUMBER:	36-1382 ✓	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 7038164000
			FAX
NAME:	NIXON & VANDERHYE ✓		
STREET:	1100 NORTH GLEBE ROAD 8TH FLOOR ✓		
CITY:	ARLINGTON ✓		
STATE/COUNTRY:	VA ✓	ZIP:	22201 ✓
EMAIL:			
APPLICATION TITLES:			
	COMMUNICATIONS NETWORK ✓		

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